Application Data Sheet

Application Information

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Application number::	
Filing Date::	1/23/2002
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Premixed Calcium Phosphate Cement Pastes
Title:: Attorney Docket Number::	Premixed Calcium Phosphate Cement Pastes 10118.00012
	·
Attorney Docket Number::	10118.00012
Attorney Docket Number:: Request for Early Publication?::	10118.00012 NO
Attorney Docket Number:: Request for Early Publication?:: Request for Non-Publication?::	10118.00012 NO
Attorney Docket Number:: Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure::	10118.00012 NO NO
Attorney Docket Number:: Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets::	10118.00012 NO NO
Attorney Docket Number:: Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?::	10118.00012 NO NO
Attorney Docket Number:: Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name::	10118.00012 NO NO
Attorney Docket Number:: Request for Early Publication?:: Request for Non-Publication?:: Suggested Drawing Figure:: Total Drawing Sheets:: Small Entity?:: Latin name:: Variety denomination name::	10118.00012 NO NO 0 YES

NO

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Laurence

Middle Name:: C.

Family Name:: Chow

Name Suffix::

City of Residence:: Germantown

State or Province of Residence:: MD

Country of Residence:: USA

Street of mailing address:: 20517 Anndyke Way

City of mailing address:: Germanown

State or Province of mailing address:: MD

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 20874

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Shozo

Middle Name::

Family Name:: Takagi

Name Suffix::

City of Residence:: Gaithersburg

State or Province of Residence:: MD

Country of Residence:: USA

Street of mailing address:: 17 Leatherleaf Court

City of mailing address:: Gaithersburg

State or Province of mailing address::

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 20878

Correspondence Information

Correspondence Customer Number:: 22908

Representative Information

Representative Customer Number:: 22908

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Non-provisional of	60/263,894	Januaray 24, 200 1

MD

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: American Dental Association Health Foundation

Street of mailing address:: 211 East Chicago Avenue

City of mailing address:: Chicago

State or Province of mailing address:: IL

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 60611